


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;">Attorney Docket No.</td><td style="width: 50%;">12-022-DIV</td></tr><tr><td>First Inventor or Application Identifier</td><td>UCHIDA et al.</td></tr><tr><td>Title</td><td>SCROLL COMPRESSOR</td></tr><tr><td>Express Mail Label No.</td><td></td></tr></table>	Attorney Docket No.	12-022-DIV	First Inventor or Application Identifier	UCHIDA et al.	Title	SCROLL COMPRESSOR	Express Mail Label No.																			
Attorney Docket No.	12-022-DIV																											
First Inventor or Application Identifier	UCHIDA et al.																											
Title	SCROLL COMPRESSOR																											
Express Mail Label No.																												
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, VA 22313-1450																										
<table border="0" style="width: 100%;"><tr><td style="width: 50%; vertical-align: top;">1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small></td><td style="width: 50%; vertical-align: top;">5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</td></tr><tr><td style="vertical-align: top;">2. <input checked="" type="checkbox"/> Specification [Total Pages 43] -Descriptive title of the Invention -Cross Reference to Related Applications -Background of the Invention -Summary of the Invention -Brief Description of the Drawings -Detailed Description of the Preferred Embodiment -Claims -Abstract of the Disclosure</td><td style="vertical-align: top;">6. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies</td></tr><tr><td style="vertical-align: top;">3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 20]</td><td></td></tr><tr><td style="vertical-align: top;">4. Oath or Declaration [Total Sheets 4] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) <small>(for continuation/divisional with Box 16 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</small></td><td></td></tr></table>		1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	2. <input checked="" type="checkbox"/> Specification [Total Pages 43] -Descriptive title of the Invention -Cross Reference to Related Applications -Background of the Invention -Summary of the Invention -Brief Description of the Drawings -Detailed Description of the Preferred Embodiment -Claims -Abstract of the Disclosure	6. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies	3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 20]		4. Oath or Declaration [Total Sheets 4] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) <small>(for continuation/divisional with Box 16 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</small>		ACCOMPANYING APPLICATION PARTS <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%;">7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</td><td style="width: 50%;"></td></tr><tr><td>8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <small>(when there is an assignee)</small></td><td><input type="checkbox"/> Power of Attorney</td></tr><tr><td>9. <input type="checkbox"/> English Translation Document <small>(if applicable)</small></td><td></td></tr><tr><td>10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449</td><td><input type="checkbox"/> Copies of IDS Citations</td></tr><tr><td>11. <input checked="" type="checkbox"/> Preliminary Amendment</td><td></td></tr><tr><td>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small></td><td></td></tr><tr><td>13. <input type="checkbox"/> *Small Entity Statement(s) (PTO/SB/09-12)</td><td><input type="checkbox"/> Statement filed in prior application, Status still proper and desired</td></tr><tr><td>14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></td><td></td></tr><tr><td>15. <input type="checkbox"/> Other:</td><td></td></tr></table>	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <small>(when there is an assignee)</small>	<input type="checkbox"/> Power of Attorney	9. <input type="checkbox"/> English Translation Document <small>(if applicable)</small>		10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations	11. <input checked="" type="checkbox"/> Preliminary Amendment		12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small>		13. <input type="checkbox"/> *Small Entity Statement(s) (PTO/SB/09-12)	<input type="checkbox"/> Statement filed in prior application, Status still proper and desired	14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>		15. <input type="checkbox"/> Other:	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)																											
2. <input checked="" type="checkbox"/> Specification [Total Pages 43] -Descriptive title of the Invention -Cross Reference to Related Applications -Background of the Invention -Summary of the Invention -Brief Description of the Drawings -Detailed Description of the Preferred Embodiment -Claims -Abstract of the Disclosure	6. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies																											
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 20]																												
4. Oath or Declaration [Total Sheets 4] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) <small>(for continuation/divisional with Box 16 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</small>																												
7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))																												
8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <small>(when there is an assignee)</small>	<input type="checkbox"/> Power of Attorney																											
9. <input type="checkbox"/> English Translation Document <small>(if applicable)</small>																												
10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations																											
11. <input checked="" type="checkbox"/> Preliminary Amendment																												
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small>																												
13. <input type="checkbox"/> *Small Entity Statement(s) (PTO/SB/09-12)	<input type="checkbox"/> Statement filed in prior application, Status still proper and desired																											
14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>																												
15. <input type="checkbox"/> Other:																												
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: 10/174,820 Prior application information: Examiner TAPOLCAI, WILLIAM E Group/Art Unit: 3744 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.																												
17. CORRESPONDENCE ADDRESS																												
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 60%;"><input checked="" type="checkbox"/> Customer Number or Bar Code Label</td><td style="width: 20%; text-align: center; font-size: 1.2em;">23400</td><td style="width: 20%;"><input type="checkbox"/> Correspondence address below</td></tr><tr><td colspan="3" style="text-align: center;"><small>(Insert Customer No. or Attach bar code label here)</small></td></tr></table>			<input checked="" type="checkbox"/> Customer Number or Bar Code Label	23400	<input type="checkbox"/> Correspondence address below	<small>(Insert Customer No. or Attach bar code label here)</small>																						
<input checked="" type="checkbox"/> Customer Number or Bar Code Label	23400	<input type="checkbox"/> Correspondence address below																										
<small>(Insert Customer No. or Attach bar code label here)</small>																												
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 40%;">Name</td><td colspan="3"></td></tr><tr><td>Address</td><td colspan="3"></td></tr><tr><td>City</td><td>State</td><td>Zip Code</td><td></td></tr><tr><td>Country</td><td>Telephone</td><td>Fax</td><td></td></tr></table>			Name				Address				City	State	Zip Code		Country	Telephone	Fax											
Name																												
Address																												
City	State	Zip Code																										
Country	Telephone	Fax																										

Name (Print/type)	JAMES E. BARLOW	Registration No. (Attorney/Agent)	32,377
Signature		Date	October 7, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Arlington, VA 22202. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Alexandria, VA 22313-1450.

10/679325
100703

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Complete if Known

Application Number _____
 Filing Date **October 7, 2003**
 First Named Inventor **UCHIDA et al.**
 Examiner Name _____
 Art Unit _____
 Attorney Docket No. **12-022-DIV**

☐ Applicant Claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**806****METHOD OF PAYMENT (check all that apply)**☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☐ Deposit AccountDeposit Account Number
Deposit Account Name**50-1147****POSZ & BETHARDS, PLC**

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	770
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)**770****2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
22	-20**= 2	X 18	= 36
Independent Claims	2	-3**= 0	X 86
Multiple Dependent			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**36**

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**0****SUBMITTED BY****Complete (if applicable)**

Name (Print/Type) **JAMES E. BARLOW** Registration No. (Attorney/Agent) **32,377** Telephone **(703) 707-9110**
 Signature *James E. Barlow* Date **October 7, 2003**

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.